

tors. Firm pressure is necessary to prevent the formation of a layer of gas, called Crook's layer, between the snow and the area to be treated, which layer interferes with the desired freezing.

The duration of the application at each treatment depends upon the nature and location of the growth, the amount of destruction desired, the age and sensitiveness of the individual and the previous treatment. In the average case five seconds will remove the top cellular layer, ten seconds will attack the papillary layer while twenty to sixty seconds will suffice for deeper growths. In exposed areas, as upon the face, it is well to be cautious and begin with a short treatment until the individual susceptibility is determined. When a rapid result is desired on a portion of the body which is covered with clothes the duration of each application can be increased, as a scar is not of so serious a consequence in this locality as it would be upon exposed portions of the body. Too lengthy applications may produce a depressed or a hard, ivory-like scar but this is usually due to an error in technic. Undesirable results are, however, comparatively rare.

The face and flexor surfaces are most sensitive to the treatment. Women, particularly blondes, are more sensitive than men, while children are three or four times as sensitive as adults.

Immediately after the application of the snow the area treated appears white, depressed and hardened and upon thawing, which requires one to three minutes, an erythema develops. Within 2 to 24 hours a vesicle forms upon the area treated and this is replaced by a crust in 2 or 3 days. In 9 to 14 days the crust separates leaving a smooth scar of normal color or of a slightly pinkish tinge which becomes normal within a week or two.

During the freezing process the patient experiences but little discomfort, but when thawing begins a moderate amount of burning is usually felt and sometimes a transient neuralgia develops.

In freezing growths on or near the eyelids a piece of dry cotton should be placed between the lid and the eyeball to prevent the freezing of the latter tissue. The same precaution holds good when growths at the borders of the lips are frozen.

The number of treatments required varies with the severity and depth of the nevus, but in a large majority of cases one treatment will suffice. In our series of cases cures have been accomplished in a large majority of instances and improvement has been noted in all.

Little after-treatment is required, the application of equal parts of zinc oxide ointment and petrolatum being all that is necessary.

Cases Demonstrated.

Case No. 1. K. H. Diagnosis, angioma cavernosa. No mark was noticed by the mother at the time of birth of the child. The condition first appeared about one month after birth as a small red spot in the median line of the forehead and has progressively increased in size for five months. At the time the patient was brought to the clinic for treatment she presented in the median line of the forehead at the hair border a purplish tumor $\frac{3}{8}$ of an inch in diameter and elevated $\frac{1}{4}$ inch. Freezing the growth twice caused its disappearance, leaving

a smooth scar, slightly depressed and paler than the normal skin. The scar is rapidly fading and in another six months it will be practically impossible to see it.

Case No. 2. C. G., age 4 months. Diagnosis, angioma cavernosa. The present condition was first noticed at the age of 7 weeks as a small red spot beneath the right eye. The tumor rapidly extended peripherally and in elevation until it became the size of a $\frac{1}{2}$ walnut and purplish in color, which was the condition appearing when we first saw the child. After seven treatments the elevation has diminished to half that which originally presented and the diameter is also considerably less. The growth is more firm and does not now distend to any marked degree when the baby cries.

Case No. 3, age 15 mo. Diagnosis, angioma cavernosa. The mother first noticed the present condition as a small red point at about the middle of the left cheek. It gradually increased in size and subsequently a similar growth appeared on the left side of the back of the neck. At the time the child appeared for treatment she presented beneath the left eye a purplish, soft tumor 3x2 cm, elevated $1\frac{1}{2}$ cm. At a lower level on the same cheek she presented a similar tumor 2x2 cm, elevation 1 cm. Another similar angioma 2x2 cm appeared on the back of the left side of the neck. After six treatments all the tumors have diminished considerably in size and the overlying skin presents almost a normal color.

Case No. 4. W. B., age 6 months. Naevus Araneus. The present condition began soon after birth as a minute red dot over the right malar eminence and has increased considerably in size since. After freezing once with the carbon dioxide snow the condition completely disappeared without leaving any scar.

MEDICAL LAWS OF CALIFORNIA.*

By CLARENCE F. LEA, Santa Rosa.

California, in common with most of the other states of this country, has attempted to regulate the practice of medicine. In 1876 the legislature passed an act specifying the requirements for the right to practice medicine and providing for a State Medical Society, who had charge of issuing certificates to persons who established their right to certificates to practice; said Medical Society was also given power to refuse the right to practice to individuals guilty of unprofessional conduct, and for similar cause they could revoke certificates to those who were practicing. In that original act a person practicing medicine was defined to be one, "who shall profess publicly to be a physician and to prescribe for the sick, or who shall append to his name the letters of M. D."

The law provided for only one form of certificate to practice medicine. The holder of a diploma as a graduate in medicine was granted a certificate without further examination; if not a holder of a diploma, the applicant was required to submit himself to such examination as the board should require, and if satisfactory to the board, the applicant was granted a certificate.

After two years' trial of the original act, it was evidently found insufficient and was amended in 1878. A somewhat unique provision was inserted in which the law prescribed that a diploma presented by an applicant should be examined as to its genuineness.

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ness, and if it be found as represented, the secretary of the board should receive a fee of five dollars, but if the diploma be found to be fraudulent, the board should charge and collect from the applicant the sum of twenty dollars. The law did not go further and provide as to any other result from presenting a diploma found to be fraudulent. The act of '78 also provided that the Medical Society of the State of California, the Eclectic Medical Society and the State Homeopathic Medical Society and no other corporations or persons should appoint members on the Board of Examiners. The act of '78 also attempted to provide a method for hearing and enforcing the attendance of witnesses where charges of unprofessional conduct were made.

In 1901 the legislature again enacted a law regulating the practice of medicine in this state. This law was also amended in 1907, in 1909, and also at our recent legislature in 1911. However, the general purpose of these regulatory provisions have been the same. The provisions of the law are more satisfactory now than at the earlier dates when regulations were attempted. That is, the law is more practical and specific in its provisions, and enforcement has been made somewhat easier.

As the law now stands, the State Medical Board has its office at San Francisco, and is composed of eleven members of which five are of the Allopathic, two of the Homeopathic, two of the Eclectic and two of the Osteopathic system of medicine.

The law now provides for the issuance of three forms of certificates instead of for only one, as under the original acts. Under the present regulations, the Board may issue:

First, a certificate authorizing the holder thereof to practice medicine and surgery;

Second, a certificate authorizing the holder to practice osteopathy;

Third, a certificate authorizing the holder thereof to practice any other system or mode of treating the sick or afflicted not referred to in that section.

In order to receive a certificate permitting practice of medicine and surgery, the applicant must present a diploma from a legally chartered medical school, the requirements of which are equal to those prescribed by the association of American Medical Colleges, or satisfactory evidence of having possessed such diploma.

An applicant for a certificate to practice osteopathy, is subject to the same regulations otherwise, except that in place of the diploma, they shall be required to file a diploma from a legally chartered college of osteopathy, having a course of instruction of at least three years of nine months each, and including the studies examined upon under the act regulating the admission to practice.

Applicants for a certificate to practice any other system or mode of treatment are otherwise subject to the same regulations, except that they shall be required to file a diploma from a legally chartered college of the system or mode of treatment which the applicant claims or intends to follow.

The law now further provides that the State Board of Medical Examiners may issue a certificate to any person who has practiced a special branch of medicine and surgery for a period of not less than

thirty-five years, fifteen years of which time shall have been spent within the State of California. The latter sort of an applicant shall not be required to file any diploma, but may be required to take an examination of a practical character; and in reference to special applications of this character, it is further provided that the board may require a practical demonstration and proof of effecting a cure, in such special line, before a certificate shall be issued to such applicant.

And the law now further provides unless otherwise stated all applicants must be personally examined by the board as to their qualifications. Such examination shall be practical in character and designed to discover the applicant's fitness to practice his profession, and such examination shall be upon the fundamental subjects, named in the statute.

There is a further provision of the law giving any surgeon honorably discharged from the Medical Department of the United States Army or Navy, regular or volunteer, the right to practice medicine and surgery in the State of California, by filing a sworn copy of his discharge with the State Board.

The law further makes it a crime for any applicant to use a counterfeited or substituted or fraudulent diploma in attempting to procure a certificate to practice; or to practice under an assumed name. It is also a misdemeanor to assume the degree of doctor of medicine or append the letters "M. D." to one's name, without having such right duly conferred upon him by a diploma from a recognized medical college or school legally empowered to confer the same. The law also includes a further requirement that all persons engaged in the practice of medicine, surgery, osteopathy, or any other system or mode of treating the sick or afflicted shall cause to be displayed in a conspicuous manner in his office the name of every person employed in such practice by him.

It is also made a crime to practice medicine, surgery, osteopathy or any other system or mode of treating the sick or afflicted in this state without a certificate from the Board of Medical Examiners, or after the certificate granted has been revoked, or suspended. It is also provided that a person who in any sign displayed by him, or in any advertisement published in a newspaper shall use the word "doctor" as indicating or implying that he is a doctor of medicine, either before or after his name, shall append the letters "M. D." to his name without having, at the time of so doing, a valid, unrevoked certificate, shall be guilty of a misdemeanor.

The commission of the above defined offenses on proof thereof and conviction, is made punishable by imprisonment in the County Jail not less than ten days nor more than one year, or by a fine of not less than one hundred dollars nor more than one thousand dollars.

The latter provision enacted by the legislature of 1911, which raises the maximum penalty that may be imposed from six months to one year's imprisonment, and increases the possible fine from five hundred to one thousand dollars, is an important change in the law so far as the practical enforcement of it is concerned. By this change, the justice

courts have been deprived of jurisdiction to try these offenses committed after the first day of July of this year, and jurisdiction is conferred upon the Superior Courts to try the cases. Of course, the proceeding is instituted as previously, by filing a sworn complaint in the justice's court, where a preliminary examination is held, and on showing a prima facie case of violating the law, the defendant would be held over to the Superior Court for trial.

As a usual thing, a justice of the peace is not legally qualified to preside at an important trial, and his court does not present those dignified methods of procedure that are usually necessary to accompany the enforcement of the law successfully.

Of course, under the law, as it now stands, persons who held certificates to practice under the old acts heretofore cited, are permitted to continue the practice. Also a person who holds an unrevoked certificate issued by the Board of Examiners of the Association of Naturopaths of California, prior to 1907, are permitted to continue the practice upon other certificates being reindorsed.

And, of course, the acts as they stand do not inhibit service in cases of emergency or the domestic administration of family remedies.

Under the law as it now stands "unprofessional conduct" is defined as being:

First, the procuring or aiding or abetting in procuring a criminal abortion;

Second, the wilful betraying of a professional secret;

Third, of advertising of medical business which is intended or has a tendency to deceive the public or impose upon ignorant persons, and so be harmful or injurious to public morals or safety;

Fourth, all advertising of any medicine or means whereby the monthly periods of women can be regulated or re-established if suppressed;

Fifth, conviction of any offense involving moral turpitude;

Sixth, habitual intemperance;

Seventh, the personation of another licensed practitioner of a like or different name.

A trial upon a charge of unprofessional conduct must be had before the State Board of Medical Examiners, that not being a matter of which the ordinary civil courts take jurisdiction.

It is a part of the duty of the Board of Medical Examiners to assist in the prosecution of persons charged with illegally practicing medicine.

The question as to the constitutionality of these statutes and the right of the legislature to enact the same has frequently been disputed. But those questions are now settled in this state, and the constitutionality of the laws along the lines heretofore enacted by our legislature is fully established. We cannot ignore the fact that there is a more or less widespread opposition to the enforcement of these laws. In an indifferent way the opposition is founded upon an ignorance of their provisions and purpose, but in a more active way the opposition is due to the efforts of illegal practitioners and their friends. The cry of interfering with personal liberty is one to which the average layman gives an attentive ear. The charge that these laws have been placed upon the statute books for the benefit of the

medical profession and to aid them in monopolizing the business rather than for the public good, is a charge frequently made and entertained by a greater or less number of people. This opposition is to some extent a thing to be reckoned with in the practical administration of the law, but should in no way prevent attempts at the enforcement of the law. The fact that there is such an opposition is commonly met with, and was incidentally brought to my attention since it was announced in the papers that I was to appear before the medical society, by my receiving communications from two widely different sources enclosing me literature extensively denouncing the medical fraternity. But to my mind there is not the slightest doubt of the beneficial effect and necessity for statutes along the general lines of those enacted in this state. Our statute, to be of any value, in protecting the public, could not be more liberal than it is when it authorizes granting a certificate to a properly qualified person, in any mode of treating the sick or afflicted, who passes a practical examination in the fundamental principles that furnish the foundation of every method of combating disease.

In a comparatively recent case, our Supreme Court has said: "Such regulations are for the general welfare, and specifically, to protect people from the arts of quacks and pretenders and from the mistakes of incapable practitioners." And the Supreme Court further said that the Board of Medical Examiners constitutes a state agency for the regulation of the practice of medicine and surgery, and that it must discharge that duty impartially for the benefit of the people and not for the promotion of the interests of any school of medicine or medical society.

The state has wisely prescribed qualifications necessary for the practice of every other legitimate profession, and in many instances, it refuses to permit even the individual who is willing, to be made the victim of what the state has determined is against public welfare. This is true of the gambling laws, of all the so-called laws against vice, of the laws regulating and protecting the public against unsanitary conditions, and it is also true of the grosser crimes of violence. The law deprives the individual of the right to be subjected to such crimes, even with his own consent. So the individual, though he may desire to be doctored by quack or incompetent person, should be denied that privilege so far as it can be done practically; because outside of his own rights, society is interested in the preservation of his health, both for his own sake, and for those who may be dependent upon him, and for the sake of society upon which he may become dependent.

Very little has been accomplished in enforcing the law against illegal practitioners in this county. One unsuccessful attempt was made at Healdsburg last year, the jury disagreeing. Through an unusual press of business of more pressing and possibly of more important character, my office did not diligently follow up that prosecution. We expect soon to be able to give attention to such cases, and we believe in the enforcement of these laws, and will be glad to have the co-operation of the medical society in taking these matters up as violations of the law may hereafter require.

To do so we should first have the proof so that we can establish a meritorious case, and whether the jury convicts or acquits, we can then have the satisfaction of knowing that they should have convicted, and eventually public sentiment will approve and aid such prosecutions.

The practice of medicine without a license does not belong to the class of crimes designated as *mala in se*—that is, bad in themselves. It belongs purely to that class of offenses designated as *mala prohibita*, being bad only because the legislature has so declared. In this class of offenses where the prosecution is not able to present any specific injury or injured person, as a result of the violation of the law, the average layman as a juror is disinclined to convict. He is more inclined to resort to manufactured excuses or sophistry to excuse himself from performing his duty, than he is to enforcing the law. The average layman undervalues the importance to society of enforcing the laws, as they are written, and his lack of training and experience makes him underestimate the value and importance of the law intended to protect the public as well as the careless individual, against the incompetent and unscrupulous practitioner. Even though the law should be entirely and technically enforced against every practitioner without a license, yet even then, we have only partially accomplished the purpose designed to be attained by the law. The medical profession, unfortunately, like every other profession and class of men, is not without its unscrupulous and incompetent practitioners. The true interest of legitimate practitioners, as well as that of the public, demands that all good citizens should co-operate to eliminate the unprofessional, unscrupulous and illegitimate practice of medicine. The abilities and genius of men were never applied to a higher or more sacred calling than that of a physician. The possibility of a commendable career both from a selfish standpoint and from the public standpoint is nowhere greater than in the medical profession, and every layman to a limited degree at least, has the same interest in upbuilding the medical profession, as have our most commendable practitioners.

A CASE OF PARTIAL TREMULOUS SCRIVENER'S PALSY;

THE PSYCHOGENESIS OF WHICH WAS DISCOVERED IN ONE INTERVIEW WHICH LED TO RECOVERY THROUGH THE PATIENT'S OWN EFFORT.

By TOM A. WILLIAMS, M. B., C. M.

A naval paymaster, aged thirty-two years, single, was referred to me early in 1908 by his brother, a physician in Boston, because when he returned to work after the drainage of a large perityphlitic abscess which discharged for a month, he found that his signature was no longer uniform. Instead of improving, he became worse with practice; and although his other writing was not so seriously impaired he had ceased writing entirely and conducted his correspondence by dictation and signatures. His

signature is exceedingly shaky; and as it was made with ever increasing difficulty as the day progressed and became almost illegible in the afternoon, he feared that he would lose his position. As may be imagined, the ever-recurrent anxiety of this tended to make his writing still more difficult and tremulous.

Previous Illness and History. The patient had a good recovery from typhoid fever in 1890. In 1901 he had inflammatory rheumatism which, however, left no cardiac weakness or other after effect. As a child, he had pertussis, scarlatina, mumps, measles and pneumonia. He is still subject to amygdaletis which is sometimes febrile, which makes him feel out of sorts. Nine years ago he had gonorrhea. He is positive there has been no chancre. He used to have malaria, but has had none since 1900 or so.

Present Illness. His trouble is comprised in the statement that he is "unable to write as his work requires." He admits that he is nervous in making a signature before me; and says that he can make it better than this. He had not fully recovered his strength on returning to work after his operation, and used to tire. But he had not noticed any particular change in his writing until his attention was drawn to a lack of uniformity in his signature of the checks he signed by the declaration of a bank official who refused one of them. He had not worried about his writing at all before this; but after this became apprehensive about it all the time. The naval doctor whom he consulted merely gave him bromides, which of course did him no good as regards the power to write. His brother, the physician, believed that he had had toxæmia and post-operative shock.

Examination: The deep reflexes were exceedingly active. The cutaneous reflexes were feeble, but the toes flexed upon stroking the sole.

The pupils reacted to light and accommodation. The cardiac rhythm was not perfectly regular. But there was no enlargement, thrill or bruit. There was no sclerosis of the arteries and the pulse was soft, moderate in frequency and without abnormal characters, although the right impact seemed feebler than the left. There was slight emphysema of the lung. The examination was otherwise negative.

This condition of the reflexes is consistent with a toxicosis interfering with the full function of the cerebral neurones which inhibit the activity of the deep reflexes and, it is believed, subserve that of the cutaneous reflexes.

But as the state of the reflexes of this patient threw no light upon the genesis of his condition, it was necessary to ascertain this otherwise. The question which arose was whether the patient's incapacity at present arose directly from an intoxication of his neurones, or whether both his incapacity and the toxicosis were psychogenic. Analysis of his psychological history might elucidate this problem. So it was undertaken.

In purely toxic states, often labeled neurasthenic, while the reflexes are sometimes enfeebled, in some cases they are exaggerated. It perhaps depends upon the nature of the poison producing the syndrome. In *psychogenetic* states of anxiety, the deep reflexes are always exaggerated.